

County: Milwaukee
MILWAUKEE PROTESTANT BRADFORD TERRACE
2429 EAST BRADFORD AVENUE

Facility ID: P100

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MILWAUKEE 53211 Phone:(414) 963-6151

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 51

Total Licensed Bed Capacity (12/31/02): 54

Number of Residents on 12/31/02: 42

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

No

Yes

No

43

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						1 - 4 Years			50.0
Supp. Home Care-Personal Care	No						More Than 4 Years			31.0
Supp. Home Care-Household Services	No		Developmental Disabilities	2.4	Under 65	4.8				19.0
Day Services	No		Mental Illness (Org./Psy)	7.1	65 - 74	7.1				-----
Respite Care	Yes		Mental Illness (Other)	4.8	75 - 84	28.6				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	50.0				*****
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.5				Full-Time Equivalent
Congregate Meals	No		Cancer	0.0		-----				Nursing Staff per 100 Residents
Home Delivered Meals	No		Fractures	31.0		100.0				(12/31/02)
Other Meals	No		Cardiovascular	14.3	65 & Over	95.2				-----
Transportation	No		Cerebrovascular	9.5		-----				RNs 11.8
Referral Service	No		Diabetes	2.4	Sex	%				LPNs 9.6
Other Services	No		Respiratory	7.1		-----				Nursing Assistants,
Provide Day Programming for			Other Medical Conditions	21.4	Male	35.7				Aides, & Orderlies 51.5
Mentally Ill	No			-----	Female	64.3				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	6	100.0	249			0	0.0	0	0	0.0	0	34	100.0	202	0	0.0	0	2	100.0	225	42	100.0
Intermediate	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0				0	0.0		0	0.0		34	100.0		0	0.0		2	100.0		42	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

		% Needing				Total
Percent Admissions from:		Activities of	%	Assistance of	% Totally	Number of
Private Home/No Home Health	2.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.3	Bathing	2.4	59.5	38.1	42
Other Nursing Homes	0.8	Dressing	7.1	66.7	26.2	42
Acute Care Hospitals	92.9	Transferring	16.7	61.9	21.4	42
Psych. Hosp.-MR/DD Facilities	0.4	Toilet Use	14.3	47.6	38.1	42
Rehabilitation Hospitals	1.3	Eating	33.3	59.5	7.1	42
Other Locations	0.4	*****				
Total Number of Admissions	238	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	14.3		Receiving Respiratory Care	16.7
Private Home/No Home Health	29.8	Occ/Freq. Incontinent of Bladder	42.9		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	23.9	Occ/Freq. Incontinent of Bowel	35.7		Receiving Suctioning	0.0
Other Nursing Homes	7.6				Receiving Ostomy Care	2.4
Acute Care Hospitals	14.3	Mobility			Receiving Tube Feeding	2.4
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.8		Receiving Mechanically Altered Diets	28.6
Rehabilitation Hospitals	0.0					
Other Locations	14.7	Skin Care			Other Resident Characteristics	
Deaths	9.7	With Pressure Sores	0.0		Have Advance Directives	88.1
Total Number of Discharges		With Rashes	7.1		Medications	
(Including Deaths)	238				Receiving Psychoactive Drugs	81.0

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

		Ownership:		Bed Size:		Licensure:		All	
		This Facility		50-99		Skilled		Facilities	
		Peer Group		Peer Group		Peer Group		Peer Group	
		% Ratio		% Ratio		% Ratio		% Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	79.6	85.6	0.93	86.7	0.92	84.2	0.95	85.1	0.94
Current Residents from In-County	92.9	88.1	1.05	90.3	1.03	85.3	1.09	76.6	1.21
Admissions from In-County, Still Residing	8.0	23.6	0.34	20.3	0.39	21.0	0.38	20.3	0.39
Admissions/Average Daily Census	553.5	134.2	4.12	186.6	2.97	153.9	3.60	133.4	4.15
Discharges/Average Daily Census	553.5	140.2	3.95	185.6	2.98	156.0	3.55	135.3	4.09
Discharges To Private Residence/Average Daily Census	297.7	46.8	6.35	73.5	4.05	56.3	5.28	56.6	5.26
Residents Receiving Skilled Care	100	90.1	1.11	94.8	1.05	91.6	1.09	86.3	1.16
Residents Aged 65 and Older	95.2	96.3	0.99	89.2	1.07	91.5	1.04	87.7	1.09
Title 19 (Medicaid) Funded Residents	0.0	52.8	0.00	50.4	0.00	60.8	0.00	67.5	0.00
Private Pay Funded Residents	81.0	34.8	2.33	30.4	2.66	23.4	3.46	21.0	3.85
Developmentally Disabled Residents	2.4	0.6	3.83	0.8	3.17	0.8	2.97	7.1	0.34
Mentally Ill Residents	11.9	35.2	0.34	27.0	0.44	32.8	0.36	33.3	0.36
General Medical Service Residents	21.4	23.7	0.91	27.0	0.79	23.3	0.92	20.5	1.05
Impaired ADL (Mean)	56.2	50.5	1.11	48.9	1.15	51.0	1.10	49.3	1.14
Psychological Problems	81.0	54.7	1.48	55.5	1.46	53.9	1.50	54.0	1.50
Nursing Care Required (Mean)	7.1	7.2	0.99	6.8	1.06	7.2	0.99	7.2	0.99